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To: Paul A. Zucker
Company: USPTO - Art Unit 1621
Fax Number: 703-872-9306
Date: 1/10/2005

Number of Pages (*including cover sheet*): 2

- For your information
- Please respond
- Urgent
- Confidential

Jerad G. Seurer
Patent & Trademark CounselTyco / Healthcare / Mallinckrodt
675 McDonnell Boulevard
PO Box 5840
St. Louis, Missouri 63134Telephone 314-654-3814
Facsimile 314-654-3156

RE: SERIAL NO. 10/089,036 TO ALBERTO ET AL.

The following is an updated "Power of Attorney and Change of Correspondence Address" form related to the above-referenced patent application. While an original is being submitted to the Office via US first class mail, I am faxing you a copy so that you know I am authorized to discuss this case with you when you return my telephone call. I look forward to speaking with you in the near future regarding the restriction requirement found in the Office Action mailed 11/18/2004.

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PTO/SB/82 (09-04)

Approved for use through 11/30/2005. OMB 0851-0035

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/089,036
Filing Date	03/25/2002
First Named Inventor	Roger S. Alberto
Art Unit	1621
Examiner Name	Paul A. Zucker
Attorney Docket Number	1373 WO/US

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

I hereby appoint the practitioners associated with the Customer Number: 24289

Please change the correspondence address for the above-identified application to:

The address associated with
Customer Number:

OR

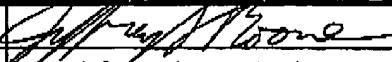
<input checked="" type="checkbox"/> Firm or Individual Name	Jerad G. Seurer			
Address	Mallinckrodt Inc. PO Box 5840			
City	St. Louis	State	MISSOURI	Zip
Country	United States			
Telephone	314-654-3814	Fax	314-654-3156	

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Jeffrey S. Boone on behalf of Mallinckrodt Inc.		
Date	01/10/2005	Telephone	314-654-8955

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete. Including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-8199 and select option 2.